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Atty. Docket No. SIC-99-047

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**BOX PATENT APPLICATION**  
**ASSISTANT COMMISSIONER FOR PATENTS**  
**Washington, D. C. 20231**

Sir:

Transmitted herewith for filing is the [X] patent application, [ ] continuation, [ ] divisional, [ ] continuation-in-part patent application of prior application No. \_\_\_\_\_

I hereby certify that this is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, D. C. 20231

By Elizabeth J. Deland

Inventor(s): KAZUHIRO FUJII

For: BELL CRANK ASSEMBLY AND MOUNTING BRACKET FOR A BICYCLE HUB TRANSMISSION

Enclosed are:

[X] 10 pages of specification, 3 pages of claims, and 1 page of abstract.

[X] 7 sheet(s) of [ ] formal [X] informal drawing(s).

A [ ] signed [X] unsigned Declaration & Power of Attorney.

A [ ] signed [ ] unsigned Declaration, [ ] newly executed or [ ] copy from a prior application (37 CFR 1.63(d)).

Deletion of Inventor(s): Signed statement attached deleting inventor(s) named in the prior application, 37 CFR 1.63(d)(2) and 1.33(b).

A Power of Attorney by Assignee with Certificate Under 37 C.F.R. Section 3.73(b).

A Preliminary Amendment.

Please cancel claim(s) \_\_\_\_\_.

A certified copy of the following priority document(s): \_\_\_\_\_.

Information Disclosure Statement under 37 CFR 1.97 with copies of cited references.

Return Receipt Postcard (MPEP 503)

Incorporation By Reference: The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

The filing fee has been calculated as shown below:

|  | (Col. 1)  | (Col. 2)  |
|--|-----------|-----------|
| FOR:   | NO. FILED | NO. EXTRA |
| BASIC FEE  |           |           |
| TOTAL CLAIMS   | 20-20=    | 0         |
| INDEP CLAIMS   | 3-3=      | 0         |
| <input checked="" type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED |           |           |

\* If the difference in Col. 1 is less than zero, enter "0" in Col. 2

| SMALL ENTITY |       | OTHER THAN A<br>SMALL ENTITY |       |
|--------------|-------|------------------------------|-------|
| RATE         | FEES  | RATE                         | FEES  |
|              | \$345 |                              | \$690 |
| x9=          |       | x18=                         | \$    |
| x39=         | \$    | x78=                         | \$    |
| +130=        | \$    | +260=                        | \$    |
| TOTAL        | \$    | TOTAL                        | \$690 |

[ X] A check for \$ 690 is enclosed.

Two copies of this sheet are enclosed.

Respectfully submitted,

DELAND LAW OFFICE

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